

<b>Issue Classification</b> 	Application No.	Applicant(s)
	09/665,534	YOSHIMURA ET AL.
	Examiner	Art Unit
	Callie E. Shosho	1714

1 of 2

ORIGINAL				CROSS REFERENCE(S)									
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)								
523		161		524	437	441	449	494					
INTERNATIONAL CLASSIFICATION				106	404	417	456	489					
C	0	9	D	11/18									
C	0	9	C	1/24									
C	0	9	C	1/64									
C	0	4	B	14/20									
C	0	4	B	14/22									
												Total Claims Allowed: 32	
(Assistant Examiner) (Date)				Callie Shosho Primary Examiner TC 1700, AU 1714 <i>Callie Shosho 3/3/04</i> (Primary Examiner) (Date)								O.G. Print Claim(s)	O.G. Print Fig.
 <i>Callie Shosho 03/09/04</i> (Legal Instruments Examiner) (Date)												1	-

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R. 1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	①	29	31	61	91	121	151
2	2	30	32	62	92	122	152
3	3	31	33	63	93	123	153
4	4	32	34	64	94	124	154
5	5		35	65	95	125	155
6	6		36	66	96	126	156
7	7		37	67	97	127	157
8	8		38	68	98	128	158
9	9		39	69	99	129	159
10	10		40	70	100	130	160
11	11		41	71	101	131	161
—	12		42	72	102	132	162
12	13		43	73	103	133	163
13	14		44	74	104	134	164
14	15		45	75	105	135	165
16	16		46	76	106	136	166
15	17		47	77	107	137	167
17	18		48	78	108	138	168
18	19		49	79	109	139	169
21	20		50	80	110	140	170
19	21		51	81	111	141	171
20	22		52	82	112	142	172
22	23		53	83	113	143	173
25	24		54	84	114	144	174
23	25		55	85	115	145	175
24	26		56	86	116	146	176
—	27		57	87	117	147	177
26	28		58	88	118	148	178
27	29		59	89	119	149	179
28	30		60	90	120	150	210

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ISSUE CLASSIFICATION			
ORIGINAL		CROSS REFERENCE(S)	
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)
523	161		
INTERNATIONAL CLASSIFICATION			
C 0 8 K	3/10		
C 0 8 K	3/34		
C 0 8 K	3/40		
	/		
	/		
(Assistant Examiner) (Date)		Callie Shosho Primary Examiner TC 1700, Au 1714 <i>Callie Shosho 3/8/04</i> (Primary Examiner) (Date)	
(Legal Instruments Examiner) (Date)		Total Claims Allowed: 32	
		O.G. Print Claim(s)	O.G. Print Fig.
		1	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
211		241		271		301	
212		242		272		302	
213		243		273		303	
214		244		274		304	
215		245		275		305	
216		246		276		306	
217		247		277		307	
218		248		278		308	
219		249		279		309	
220		250		280		310	
221		251		281		311	
222		252		282		312	
223		253		283		313	
224		254		284		314	
225		255		285		315	
226		256		286		316	
227		257		287		317	
228		258		288		318	
229		259		289		319	
230		260		290		320	
231		261		291		321	
232		262		292		322	
233		263		293		323	
234		264		294		324	
235		265		295		325	
236		266		296		326	
237		267		297		327	
238		268		298		328	
239		269		299		329	
240		270		300		330	